

**Commercial Shellfish Harvesting License  
Town of Pembroke**

**Name of Applicant** \_\_\_\_\_

**Current Address** \_\_\_\_\_

**Telephone #** \_\_\_\_\_

**Drivers License #** \_\_\_\_\_

**Birth Date** \_\_\_\_\_ **Age** \_\_\_\_\_

**Weight** \_\_\_\_\_ **Height** \_\_\_\_\_

**Return Applications to:**

**Janice Scanlon  
71 Front Street  
Pembroke, Maine 04666**